

House Select Committee on Homeland Security Democrats

JIM TURNER, Ranking Member

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BIOSHIELD PASSES

Congressman Jim Turner, Ranking Member of the House Select Committee, made the following statement in the debate preceding the House passage of S. 15, the Project Bioshield Act of 2004.

Mr. Speaker,

To win the war on terror, we must do everything we can to protect the American people from the threat posed by terrorists using weapons of mass destruction. Perhaps the most devastating of these weapons, true weapons of mass murder, are biological weapons. The anthrax attacks of 2001 woke this nation up to the very real threat of bioterrorism. We know that al Qaeda intends to engage in bioterrorism, and that Osama bin Laden has called the use of weapons of mass destruction against the American public a "religious duty."

Nevertheless, even though we are now fully aware of this danger, in terms of medical countermeasures, our biodefenses are no better than they were in September 2001. No new medical treatments, vaccines or life-saving drugs, have been approved for use. There is no antitoxin for ricin poison, no vaccine to protect against the plague, and no treatments of any kind against the deadly Ebola virus.

Thus I hope that the passage of this bill represents a renewed sense of urgency regarding the bioterror threat: Because this bill marks the beginning of a long road we must travel, not the end.

I support Project Bioshield because we must take action immediately to address this challenge. But from the beginning of this process, I have been concerned that this legislation will not be enough.

Project Bioshield is an experiment. We do not know if the incentives in this bill will drive our pharmaceutical industry to develop medicines for biodefense when they can make so much more money on other products. In fact, many believe the best we can hope for is that in 10 years we will have a few new countermeasures that will plug some of the holes in our biodefenses. The longer it takes for companies to step forward to fill these gaps, the longer we will remain vulnerable.

It is incumbent on Congress and this government to view our biodefenses not as an interesting experiment in economics, but as a clear necessity of national security. We must protect our population. That is our responsibility. If the private sector does not quickly step up to this

challenge after enactment of this bill, then the government needs to have the authority to do the job directly.

One example of a capability we clearly need, and that Project Bioshield does not address, is the ability to respond rapidly to a previously unknown or engineered pathogen. Terrorists may soon be able to genetically manipulate biological agents so they are resistant to our current stockpile of countermeasures and perhaps those that we develop in the future.

That is why I, along with 35 other co-sponsors, introduced H.R. 4258, the RAPID Cures Act. The legislation recognizes the growing power of biotechnology can render a pathogen like anthrax or smallpox immune to the vaccines and drugs developed through Project Bioshield. We need to develop the mechanisms to go from "bug" to "drug" – or the identification of a pathogen to the development of a countermeasure to combat it – in as little as a few months, or even weeks. Personally, I cannot think of another research goal that would bring more benefits to the security and health of the nation than this one. And that is this kind of capability that we need to bring about.

Finally, it is incumbent on Congress to exercise vigorous oversight of the implementation of this law, and ensure that this investment in resources and time, almost \$6 billion over 10 years, produces the results we need. We have had biodefense failures before. The National Smallpox Vaccination Program, announced by the President with much fanfare at the end of 2002, has fallen far short of its goal of enrolling 500,000 health care workers, with less than 10% of that number actually vaccinated. Forty percent of states report that they are unable to vaccinate their populations within ten days of an outbreak.

As soon as next month, we are likely to hear of the award of the first Bioshield contract for 75 million doses of new anthrax vaccine. But we need to be asking now, before the ink is dry on this contract: "What's the plan?" "How does this vaccine fit into our biodefenses?"

"Given the failure of the smallpox vaccination program, do we really expect our citizens to be anymore receptive to an anthrax vaccine?"

"And if the old vaccine that we do have now is safe and effective for our troops, why do we need a new one?"

"And if, as is the case, we already have a vaccine, but we lack any good treatments for anthrax infection, why are we about to invest in this product, and not in promising cures?

"And if anthrax is not a contagious disease, and this new vaccine will only work after three injections over several weeks, how does it actually protect us in the event of an anthrax attack?

Before the Secretaries of Homeland Security and Health and Human Services decide to spend a billion dollars on this vaccine, we in Congress need to have the answers to these questions.

For this Nation, Project Bioshield is an important, first step. But much more work remains need to be done. We must take even stronger steps as soon as possible in order to protect us and to secure us in the days ahead.

Mr. Speaker, I reserve the balance of my time.